

| CLAIMS ONLY | | | | | | | Application Number DA 575104 Applicant(s) | Filing Date |
|--------------------|----------|--------|-----------------------|--------|------------------------|--------|--|-------------|
| | | | | | | | <small>* May be used for additional claims or amendments</small> | |
| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | |
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